Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

09939502

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                                |                               |                              |                  |        | SMALL ENTITY TYPE   |                        | OR      | OTHER THAN OR SMALL ENTITY |                        |
|---|--|---|--------------------------------|-------------------------------|------------------------------|------------------|--------|---------------------|------------------------|---------|----------------------------|------------------------|
| TOTAL CLAIMS  |  |   | 36                             |                               |                              |                  |        | RATE                | FEE                    |         | RATE                       | FEE                    |
| FOR   |  |   | NUMBER FILED                   |                               | NUMBER EXTRA                 |                  |        | BASIC FEE           | 355.00                 | OR      | BASIC FEE                  | 710.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | 36 — minus 20=                 |                               | · 16                         |                  |        | X\$ 9=              |                        | OR      | X\$18=                     | 288.0                  |
| INDEPENDENT CLAIMS  |  |   | 4_ mi                          | nus 3 =                       | */                           | */               |        | X40=                |                        | OR      | X80=                       | 80,00                  |
| MU  | LTIPLE DEPEN                                   | DENT CLAIM P                                | <del></del>                    |                               |                              |                  |        | +135=               |                        | OR      | +270=                      | 00.00                  |
| * If  | the difference                                 | in column 1 is                              | less than zero, enter "0" in o |                               |                              | column 2         |        | TOTAL               |                        | OR      | TOTAL                      | 1078.0                 |
|   | Ci   | AIMS AS A                                   | MENDED - PART II               |                               |                              |                  | 101712 |                     | 0.1                    | OTHER   |                            |                        |
| (Column 1)  |  |   | (Column                        |                               |                              | (Column 3)       |        | SMALL E             | NTITY                  | OR      | SMALL                      |                        |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                                | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus                          | **                            |                              | =                |        | X\$ 9=              |                        | OR      | X\$18=                     |                        |
|   | Independent                                    | *   | Minus                          | ***                           |                              | =                |        | X40=                |                        | OR      | X80=                       |                        |
| Ĺ   | FIRST PRESE                                    | NTATION OF MI                               | JLTIPLE DEF                    | PENDEN                        | CLAIM                        |                  | ] [    | +135=               |                        | OR      | +270=                      |                        |
|   |  |   |                                |                               |                              |                  | L      | TOTAL               |                        |         | TOTAL                      |                        |
|   |  |   | ADDIT. FEE                     |                               | 1 - 1 -                      | ADDIT. FEE       |        |                     |                        |         |                            |                        |
| AMENDMENT B   |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |                                | NUM<br>PREVI                  | HEST<br>BER<br>OUSLY<br>FOR  | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus                          | **                            |                              | =                |        | X\$ 9=              |                        | OR      | X\$18=                     |                        |
|   | Independent                                    | *   | Minus                          | ***                           |                              | <u> -</u>        | 11     | X40=                |                        | OR      | X80=                       |                        |
| L   | FIRST PRESE                                    | NTATION OF M                                | ULTIPLE DEF                    | PENDEN                        | CLAIM                        |                  | ]      | +135=               |                        | OR      | +270=                      |                        |
|   |  |   |                                |                               |                              |                  | L      | TOTAL<br>ADDIT. FEE |                        | OR      | TOTAL<br>ADDIT. FEE        |                        |
|   |  | (Column 1)                                  |                                |                               | mn 2)                        | (Column 3)       |        | 10011.1 22          |                        | -       | 7,0011.1 22                |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                                | NUM<br>PREVI                  | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus                          | **                            |                              | =                |        | X\$ 9=              |                        | OR      | X\$18=                     |                        |
|   | Independent                                    | *   | Minus                          | ***                           |                              | =                | 1      | X40=                |                        | OR      | X80=                       |                        |
| L   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                |                               |                              |                  |        | +135=               |                        |         | +270=                      |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |   |                                |                               |                              |                  |        |                     |                        | OR      | TOTAL                      |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                                |                               |                              |                  |        |                     |                        |         |                            |                        |
|   | The "Highest Nun                               | nber Previously Pa                          | nd For" (Total o               | r Independ                    | ient) is the                 | e nighest numb   | er fou | ind in the app      | ropriate box           | k in co | iumn 1.                    |                        |